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o a collection of information unless it displays a Valid OMB control number.

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | | | | on or Docker Ry | 128 |
|--|---|----------------------|--------------|------------------------|-----------------------|-----------------|--------------------|-----------------|----------------------------|--------------------|-----------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | | |
| - | FOR | NUMBE | NUMBER FILED | | NUMBER EXTRA | | RATE | FEE | | RATE | FEE |
| | C FEE FR 1.16(a)) | | | | | | | \$ | OR | | \$ |
| TOTAL CLAIMS (37 CFR 1.16(c)) | | | minus 20 = * | | | | ·x \$ = | | OR | x s = | |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | | /IS | minus 3 = | | 1. | | x s = | | OR | x \$ = | |
| | | NT CLAIM PRESEN | | | | ┟ | | | OR | | |
| | | | | | L | + \$= | | | +\$= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | TOTAL | | OR | TOTAL | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | |
| // <i>3010</i> % | | (golumn 1) | umn 1) (| | (Column 2) (Column 3) | | SMALL ENTITY | | OR | OTHER SMALL | |
| AMENDMENT A | - | CLAIMS REMAINING | | HIGHEST NUMBER | PRESENT | Γ | RATE | ADDI- | | RATE | ADDI- |
| | | AFTER AMENDMENT | | PREVIOUSLY PAID FOR | EXTRA | | KATE | TIONAL A FEE | | NAIL | TIONAL FEE |
| | Total (37 CFR 1,16(c)) | 36 | Minus | 56 | = 0 | | x s · = | | OR | x s= | 166 |
| | Independent (37 CFR 1,18(b)) | * 1 | Minus | ··· 2 | = 0 | ŀ | x s = | 1/ | OR | x s = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | Ì | | X | OR | | |
| (a) of it file(a)) | | | | | L | + \$ = TOTAL | /\ | | +s = TOTAL | | |
| | | | | | | | ADD'L FEE | 1 4 | OR | ADD'L FEE | |
| | ; | (Column 1) CLAIMS | Г | (Column 2) HIGHEST | (Column 3) | · [| | | l | | |
| T B | | REMAINING AFTER | | NUMBER PREVIOUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL | | RATE | ADDI- TIONAL |
| AMENDMENT | Tatal | AMENDMENT | Minus | PAID FOR | | | | FEE | | | FEE |
| | Total (37 CFR 1.18(c)) | | Minus | *** | | | x \$= | | OR | x \$= | |
| | Independent (37 CFR 1.16(b)) | • | Minus | | = | | x s= | | OR | x s= | |
| A | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | + \$= | · | OR | + \$= | |
| | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | |
| | | (Column 1) | | (Column 2) | (Column 3) | | • | | | , | |
| ၁ | | CLAIMS REMAINING | | HIGHEST NUMBER | PRESENT | | RATE | ADDI- | | RATE | ADDI- |
| AMENDMENT (| | AFTER AMENDMENT | | PREVIOUSLY | EXTRA | | RAIE | TIONAL | | RAIE | TIONAL |
| | Total (37 CFR 1.18(c)) | * | Minus | PAID FOR | = | | x s = | FEE | | X \$= | FEE |
| | Independent (37 CFR 1.16(b)) | • | Minus | *** | = | | | | OR | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | X \$= | | OR | | |
| THEOT PRESENTATION OF MOUTHFLE DEFENDENT CLAIM (57 OFR 1.10(0)) | | | | | | | + \$ = TOTAL | | OR | + \$= TOTAL | |
| ADD'L FEE * If the entry in column 1 is less than the entry in column 2 write "0" in column 3 | | | | | | | | | OR | ADD'L FEE | L |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". | | | | | | | | | | | |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.